

Seymour Street Journal



What's news...

From the Offices of Stuart Markowitz, MD and Stacy Nerenstone, MD

[Free CME for License Renewal](#): Click here for [CME Information](#)

In This Issue...

August 21, 2016

- [Chief's Corner](#): To All Insulin Prescribers: Transitioning to Glytec; Antimicrobial Stewardship Council Summary of Important Changes for EPIC; HHC Clinicians Need Guidance About Sepsis Definitions
- [From the President of the Medical Staff](#): Thank you for your efforts going live with Epic
- [From the HH President](#): Recognizing the sacrifices you have made to implement Epic
- HHC Achieves System-wide CME Accreditation
- Charlotte Hungerford Hospital to Join HHC
- The Department of Cardiac Rehab Receives National Certification Award
- Dr. Srinivas Mandvilli: Named Vice Chief of Pathology and Laboratory Medicine
- Hartford Hospital Ranked No. 1: U.S. News & World Report
- HHC Achieves System-wide CME Accreditation
- Save the Date for the 2017 Black & Red Benefiting Neuroscience
- Universal Flu Prevention
- [Learn to Assist](#): Patients in Need of Financial Assistance
- [Help New Patients Find You](#)
- [CME Application Submission](#)
- [Free CME for License Renewal](#)

"If you want others to be happy,

practice compassion.

*If you want to be happy,
practice compassion."*

-Dalai Lama

1948- Hartford Hospital was the first to install an automatic vertical conveyor system for the transport of sterilized goods and supplies from one floor to another.

Follow Hartford Hospital on [facebook](#),
[youtube](#) and [twitter](#)

Chief's Corner

- [Dr. Jack Greene](#), Hartford HealthCare Regional Vice President of Medical Affairs for the Hartford Region and Hartford Hospital

Just Ask Us!

We have put in place a dedicated email box for the medical staff, called "Ask Jack." The emails will be picked up each day, and I will be responsible for making sure that you receive feedback. Send your concerns to askjack@hhchealth.org.

In addition, there is a dedicated email box to ask questions of [Dr. Stu Markowitz](#). Send your questions or comments to StuandYou@hhchealth.org, and you'll get a response from Stu within 10 days.

To All Insulin Prescribers: Transitioning to Glytec

As we transition to Epic, we will also be transitioning to a new integrated Glycemic Management System called Glytec, with software named Glucommander.

Glytec provides the only of its kind, integrated glycemic management and surveillance system, Enabling hospital and healthcare systems to significantly reduce the frequency, risks and costs of hyperglycemia and hypoglycemia and offer superior care to their patients.

The Glucommander suite incorporates physician directed, evidence based computerized algorithms for safe and effective glycemic management throughout the hospital

Eight integration with Epic allows Glytec to utilize the data necessary to calculate proper insulin dosing automatically.

The algorithms take into account not only a patient's blood glucose levels, but also a host of other relevant factors including height, weight and hemoglobin A1C. The result is patient specific insulin dosing which includes IV insulin infusion, mealtime dosing, subcutaneous transitions and subcutaneous insulin dosing. the system allows for even greater monitoring of actionable data and earlier intervention with patients at higher risk for abnormal blood glucose levels.

For all insulin prescribers, you will be assigned via MRM two educational videos which delineate the process for intravenous and subcutaneous insulin dosing and details on operationalizing the Glucommander system.

Any questions can be directed to our Glycemic management team: **Dr. Robert Oberstein**, Nicole Dunn, APRN, Jenifer Ash, APRN, or Sherry Adams, MSN.

Antimicrobial Stewardship Council Summary of Important Changes for EPIC

The following changes have been made to create consistency within the system and improve care in patients receiving antimicrobials. Most of the items listed below are being implemented with EPIC but some changes may take place at your site before EPIC go-live.

Formulary and Restriction

All orders for antimicrobial will need to have an indication for use. This is an emerging requirement from a variety of regulatory agencies and payers. Checkbox selections will be available to assist prescribers.

There will be 4 levels of antimicrobial within the formulary 1) not restricted 2) restricted based on criteria or approval by ID provider 3) restricted to ID provider only and 4) criteria AND ID provider approval. Drugs in group 2 can be prescribed for the criteria listed or in the event they don't meet the criteria and provider believes it is necessary they can obtain approval from an ID provider (a consult is not mandatory, but an ID provider may ask for one to fully understand the patient in order to give consent). In the event the drug is prescribed during off hours, 7 pm to 7 am, a one time dose may be given with ID follow-up in the morning. For group 3 drugs, an ID provider must approve the drug even during off hours before it can be started. The group 3 drugs are amphotericin B lipid complex, cidofovir, daptomycin, fosarnet, pentamidine, quinidine, ceftazidime-avibactam, and ceftolozane-tazobactam.

Important formulary deletions amphotericin B liposomal (use ampho B lipid complex instead), anidalfungin and caspofungin (use micafungin instead), cefoxitin and cefotetan (use ceftriaxone and add metronidazole if anaerobic bacteria activity is needed), imipenem (use meropenem), and oxacillin (use nafcillin).

Piperacillin-tazobactam Dosing

In order to ensure adequate dosing of piperacillin-tazobactam the following dosing regimens will be utilized for all adult patients. Of note, the scheme uses only 4.5 gram doses and we will no longer stock the 2.25 gram doses or the 3.375 gram doses.

CrCL >40: 4.5 q 6 h (3h infusion)

CrCL 20-40: 4.5 q 8 h (3h infusion)

CrCL <20: 4.5 q 12 h (3h infusion)

HD (three times a week): 4.5 q 12 h (3h infusion) - ensure 1 of the 2 doses on dialysis days is after dialysis

Pneumococcal Vaccines

The nurse driven protocol to automatically vaccinate patients for pneumococcal disease is being eliminated. The influenza protocol will remain in effect. Providers can order in specific circumstances in which a delay in vaccination may be detrimental to the patient the 13 valent pneumococcal vaccine.

Pneumococcal vaccination has become more complicated with two vaccines available for adults. Most adult patients do not remember which vaccine they received. Patients should receive the 13 valent vaccine first and then after 8 weeks to a year the 23 valent vaccine should be given. Except in cases of extreme need, pneumococcal vaccination should be deferred to outpatient clinics or pharmacies.

Prolonged Infusion of Beta-lactams

Beta-lactam antibiotics are known to produce maximal efficacy when the time above the minimum inhibitory concentration of the bacteria is around 50%. In order to optimize this time and even treat some infections in which the bacteria is labeled resistant, all anti-pseudomonal beta-lactam antibiotics will default to 3 hour infusions (4 hours for doripenem). In the event that on any particular dose the nurse is unable to give a 3 hour infusion due to incompatibilities with other IV medications, they are instructed for that dose to revert back to the 30 minute infusion. A nurse should not place an additional IV line simply to allow for pro-longed infusions of beta-lactams. A separate Nursing News document has been created and is being circulated to help with the education.

Surgical and Interventional Radiology Prophylaxis

New guidelines have been created. There are recommendations based on surgical type and weight based doses for the medications. Cefazolin will be dosed with 2 grams for patients under 120 kg and 3 grams over 120 kg. Vancomycin will be dosed at 1 gm, 1.5 grams, and 2 grams for patients weighing < 80 kg, 80-120 kg, and > 120 kg respectively. Please see updated HHC guideline for full information. Additionally, there is a separate guideline for interventional radiology prophylaxis as well.

Using Cephalosporins in Patients with Penicillin Allergies

Data indicate that most cephalosporins can be given to patients with histories of penicillin allergy. This includes all of the IV cephalosporins on the HHC formulary. Please see HHC guideline on this topic for more information.

Title: Use of cephalosporins in patients with a reported penicillin allergy

Purpose: To give guidance to providers on the most up to date information regarding the cross reactivity risk

Scope: Providers, pharmacists, and nurses

Select Document Classification:

The incidence of cephalosporin cross-reactivity in penicillin allergic patients is often quoted to be approximately 7% to 10%. However, this percentage is an overestimation and was based on first-generation cephalosporins contaminated with penicillins.

The incidence of cephalosporin allergic-reactions is approximately 1% to 3% of patients with or without a penicillin allergy. There is no correlation between cephalosporin generation and incidence of cross-reactivity. These differences in antigenic sites have been confirmed with monoclonal antibodies that recognize structures unique to cephalosporins with little or no recognition of penicillins. HHC Antibiotic Prophylaxis for Surgical Procedures Guideline does not recommend cephalosporins with similar structures.

The term “allergic reaction” is often inappropriately applied to adverse reactions. A true type I, IgE-mediated allergic reaction typically occurs within 1 hour, but may occur up to 72 hours after administration of a medication. Symptoms of type I allergic reactions that may occur are anaphylaxis, urticaria, laryngeal edema, bronchospasm, hypotension or pruritic rash. If a true allergic reaction occurs, then the patient should not receive the same offending medication. Antibiotic reactions resulting in vomiting, diarrhea, nonurticarial or nonpruritic rash are not true allergies; therefore these patients may be administered repeated courses. When taking a history of a patient who had a rash after antibiotic administration, it is important to differentiate the type of rash that occurred.

RECOMMENDATIONS

Approach to drug use with penicillin drug allergies		
Penicillin Allergy Use below with caution secondary to similar side-chains	Ampicillin or Amoxicillin Allergy Use below with caution secondary to similar side-chains	HHC Cephalosporins NOT expected to cross react with penicillin allergies
Cephaloridine Cephalothin Cefoxitin	Cephalexin Cephadrine Cefatrizine Cefadroxil Cefaclor	Cefazolin Cefuroxime Ceftriaxone Ceftazidime Cefepime

Cefprozil

Patients with Stevens-Johnson syndrome, toxic epidermal necrosis, DRESS, or allergic interstitial nephritis as a result of penicillins, although unlikely to have a cross-reaction, should receive non-cephalosporin based regimens if possible based on lack of data in this situation.

Aztreonam shares the same side-chain as ceftazidime and thus cross-reactivity may occur.

Carbapenems are structurally dissimilar to penicillins and cross-reactivity is not expected when these agents are used in penicillin allergic patients.

HHC Clinicians Need Guidance About Sepsis Definitions

HHC recognized sepsis as the major driver of mortality, cost and readmissions among hospitalized patients, and launched the AIM-Sepsis collaborative in March 2015.

CMS/Medicare launched SEP-1 Sepsis related core measures on October 1, 2015.

Even before the CMS sepsis mandate came out, HHC invested heavily in sepsis education, technology, and process improvement infrastructure to improve sepsis care delivery and outcomes.

Sepsis-3: the new definitions of sepsis and septic shock were released February 2016 with the goal of updating the definitions and providing consistency of terminology to clinical practitioners, researchers, administrators, and funders.

Assessment

At this time, there is a conflict between CMS definition and the new Sepsis-3 definitions.

According to Sepsis-3; Adult patients with suspected infection can be rapidly identified as being more likely to have poor outcomes typical of sepsis if they have at least two of the following clinical criteria that together constitute a new bedside clinical score termed quickSOFA (qSOFA)- respiratory rate of 22/min or greater, altered mentation, or systolic blood pressure of 100 mm Hg or less.

Sepsis is defined as life-threatening organ dysfunction caused by a dysregulated host response to infections. For clinical operationalization, organ dysfunction can be represented by an increase in the Sequential (sepsis-related) Organ Failure Assessment (SOFA) score of two points or more.

CMS guidelines, which have been abstracted since discharges in October 2015 are:

Severe sepsis - documented suspected or actual infection/2 or more SIRS criteria and new organ dysfunction (creatinine > 2.0, platelets <100K, INR > 1.5, Lactate > 2.0 or SBP < 90

Septic shock 0 severe sepsis plus hypo-perfusion that persist after adequate fluid replacement (30ml/kg) or lactate > 4,0 or MD documentation of septic shock.

However, the Sepsis-3 Task Force also notes that:

Neither qSOFA nor SOFA is intended to be a stand-alone definition of sepsis.

the task force wishes to stress that SIRS criteria may still remain useful for the identification of infection.

the task force recommendations should not, however, constrain the monitoring of lactate as a guide to therapeutic response or as an indicator of illness severity.

The task force strongly encourages prospective validation of qSOFA in multiple US and non-US health care settings to confirm its robustness and potential for incorporation into future iterations of the definitions.

Recommendation

Our electronic alerts, public quality reporting, risk adjustment and payments are still based on the CMS method AND ICD-10 definitions of Severe Sepsis and Septic Shock.

We recommend following the current CMS definitions of Severe Sepsis and Septic shock until further notice and guidance from CMS and ICD-10.

From the President of the Medical Staff

- [Dr. Stacy Nerenstone](#), President of the Hartford Hospital Medical Staff

EPIC Go-live

As you all know, Hartford Hospital went live with Epic yesterday.

I'm sure there will be a learning curve for us all and perhaps a few bumps in the road, but I want to personally thank all my fellow Medical Staff members for their collaboration and efforts in adapting to this important change.

I know this big step will help improve care for our patients and physician to physician communication in the future.

Save the Dates:

Town Hall Meeting - September 15

Please join us as we discuss matters of interest to the medical staff.

6:45-7:45 am in the Gilman Auditorium with a light breakfast 6:15am

End of Summer Event at the New Britain Museum of American Art - September 16

RSVP by August 22

You and your guest are invited to join the Officers and other members of the Hartford Hospital Medical Staff for this special evening to socialize and enjoy each other's company at the New Britain Museum of American Art on **Friday, September 16** from 6-9 pm.

We will have exclusive admission to the gallery spaces including the works of Howard Pyle, Frederic Rodrigo Gruger, N. C. Wyeth, Norman Rockwell, to name a few. The menu will vary depending on the inspiration of the chef at Riverhouse Catering. The evening will feature heavy appetizers, small plates bursting with bold flavors and sweet endings as well as wine, beer and beverages.

Cost is \$50 per person. Dress is cocktail attire. Please respond by August 22. To reserve your space you may drop off your check or credit card form at the Medical Staff Office or mail to: Hartford Hospital Medical Staff Office, 80 Seymour Street, Hartford, CT, 06102-5037, Attention: NBMAA. If you plan to bring a guest, please indicate the name of your guest when registering.

If you have any questions, you may call Cathleen Aquino at 860.972.6167.

Please put this on your calendar - and join your friends and colleagues for an enjoyable

evening.

From the Hospital President

Dr. Stu Markowitz, Senior VP, HHC, and Hartford Region President

Thanks To All of You

I want to offer you my sincerest thanks and recognize the personal sacrifices you have made over the past several months to help build and implement the Epic electronic health record system.

This is a critical milestone for Hartford Hospital and Hartford HealthCare and a key to our future success. I have tremendous respect for your incredible commitment; your dedication to our patients, our hospital and our future; and your willingness to sacrifice your own, personal time for doing what is necessary to be successful.

The ask has been significant: time away from family and friends and nights and weekends preparing. And I want you all to know that your efforts are recognized and greatly appreciated. Epic enables our hospital and Hartford HealthCare as a system to take another giant step forward in providing our patients with better care coordination and with safer, more efficient care by eliminating duplicate testing and reducing medication errors, now that patients' medical records are in one place and can be easily shared by all providers.

I understand that this has been a massive undertaking, because Hartford Hospital is a complex institution that delivers a high level of comprehensive care. We had to map patient care pathways throughout our hospital, including the Emergency Department, which experiences more than 106,000 patient visits annually; our pharmacy, which manages hundreds of thousands of prescriptions a year; and every department, including all our outpatient locations and physicians' offices.

Through all of this, thousands of caregivers have continued to provide the best possible care to our patients and their families. Patient transfers didn't stop, and, in fact, we set all-time transfer records over the past two months. Trauma and critical care have continued to demand our attention. Those most in need have continued to receive the best care we can provide.

We know there still are challenges that lie ahead. We will expectedly have some bumps along the way as we operationalize and optimize Epic here at Hartford Hospital. However, I have extraordinary confidence in your ability and willingness to complete this work so that together, we can continue to build our hospital's reputation as the regional destination for innovative and complex care.

Thank you. I am proud to be a member of the Hartford Hospital family.

Top News

HHC Achieves System-wide CME Accreditation

On August 12, Hartford HealthCare received notification from the Connecticut State Medical Society (CSMS) that our system-wide Continuing Medical Education (CME) Program has met the standards for accreditation as a CME provider.

Hartford HealthCare is the first health system in the state to be granted this status by the CSMS.

Accreditation means that CME activities which meet the standards established by the HHC CME program will enable providers to receive CME credit which will support maintenance of licensure.

This achievement was accomplished with input from many individuals across all three HHC regions. The development of a system wide CME program is an example of our value of Excellence and striving for the highest standards in all we do. Congratulations to everyone who made this possible!

Charlotte Hungerford Hospital to Join HHC

Charlotte Hungerford Hospital in Torrington will become a member of Hartford HealthCare, pending regulatory review.

Boards of both organizations have approved the affiliation following months of dialog and due diligence. The proposed affiliation now goes before state and federal regulators - a process we expect will take several months.

The Department of Cardiac Rehab Receives National Certification Award

Hartford Hospital's Cardiac Rehabilitation Program was again awarded national accreditation. National accreditation is only awarded after a rigorous process that requires review of a year's worth of patient outcomes, testing of staff competencies, record review to ensure adherence to best practice standards and an evaluation of the programs medical readiness, patient education and patient satisfaction results.

The Cardiac Rehab Program is staffed by ALS/BLS trained RN's and cardiovascular exercise physiologists. Program outcomes include the patient's change in exercise tolerance as well as factors that reflect lifestyle, diet and exercise adherence and reduction in other cardiac risk factors. Patient satisfaction scores at HH Cardiac Rehab Program range from 92 to 100%. Multiple meta-analyses have demonstrated that cardiac rehabilitation participation decreases mortality after myocardial infarction and coronary revascularization. For more information contact: Hartford Hospital Cardiac Rehab at 860-972-2133 or the Farmington Cardiac Rehab at 860-696-0080.

Dr. Srinivas Mandvilli Named Vice Chief of Pathology and Laboratory Medicine

Dr. Srinivas Mandvilli, a Senior Staff anatomic pathologist, has been appointed as vice chief of the Department of Pathology and Laboratory Medicine.

Dr. Mandavilli joined the Department in 1999 in the Division of Anatomic Pathology and currently has the role of assistant director of Anatomic Pathology. His clinical responsibilities have been in Cytopathology and Surgical Pathology. His interests in surgical pathology include gynecologic pathology and neoplastic neuropathology.

He has had an active role in the education of pathology residents and fellows and has served as the program director for the Surgical Pathology Fellowship. He has, also, served HH and the Medical Staff for a number of years as chairman of the Tissue Review Committee. As a member of Hartford Pathology Associates, PC Dr. Mandavilli serves on its Executive Committee.

Hartford Hospital Ranked No. 1 in Region by U.S. News & World Report

[Hartford Hospital](#) has been ranked No. 1 in the Hartford region and among the best in Connecticut for 2016-17 by U.S. News & World Report.

The annual [U.S. News Best Hospitals rankings](#), now in its 27th year, recognizes hospitals that excel in treating the most challenging patients. This year, Hartford Hospital ranks in five specialties and seven

procedures.

U.S. News & World Report recently changed its methodology, making it much more difficult to achieve a rank in “High Performing” banners. The new methodology recognizes the best of the best - the top 10 percent - and Hartford Hospital ranks high-performing in five specialties and seven procedures:

High Performing Specialties:

- [Diabetes and endocrinology](#)
- [Gastroenterology and GI Surgery](#)
- [Nephrology](#)
- [Orthopedics](#)
- [Pulmonology](#)

High Performing Procedures:

- [Aortic valve surgery](#)
- [COPD](#)
- [Colon cancer surgery](#)
- [Heart bypass surgery](#)
- [Heart failure](#)
- [Hip replacement](#)
- [Knee replacement](#)

Save the Date for the 2017 Black & Red Benefiting Neuroscience

Save Saturday, January 28, 2017, for Hartford Hospital's annual gala, the Black & Red. The Hartford HealthCare Neuroscience Institute at Hartford Hospital will be honored at the event, which will feature entertainment by Fitz & The Tantrums.

Funds raised through the 2017 Black & Red will help create the platform to further enhance the research and outcome measurements that will elevate the breadth and depth of neuroscience services in Connecticut. Tickets for the hospital's signature fundraiser will go on sale in the coming months.

See our Sponsorship Opportunities Guide to find out about all event sponsorship options. The deadline to sponsor is Friday, December 16. For questions, contact Carla Burgess, director of development, at carla.burgess@hhchealth.org or (860) 972-1932. For event updates, visit giving.harthosp.org/blackandred.

Universal Flu Prevention

Flu shots required by November 1.

Exemption applications required by October 1.

To learn more visit the [Flu Prevention](#) page of HHC Connect, <http://hhconnect.org/flu>

Excellence

Drs. Pearlson and Stevens Awarded Multi-million-dollar Grant from National Institute on Drug Abuse

Dr. Godfrey Pearlson and Dr. Michael Stevens at the Olin Center at the Institute of Living were awarded a several-million-dollar grant from the National Institute on Drug Abuse to study the effects of smoked marijuana on the brain and the driving risk. With the increased tendency of states to legalize or decriminalize the use of recreational marijuana and the legalization of medical marijuana in many localities, the risk that people will operate motor vehicles while intoxicated on cannabis is increasing significantly. How to quantify these risks and introduce roadside sobriety testing for marijuana-impaired driving is a question that this new grant will help us address.

Preventive Cardiology Research Department Receives Grant from Jefferson House

Investigators in the Department of Preventive Cardiology at Hartford Hospital have received funding from Jefferson House for their project: *The Effect of a Cardiologist on Hospital Readmission Rates and Costs, and Patient Satisfaction at a Skilled Nursing Facility*.

The Preventive Cardiology Research Department has been awarded \$178,477.00 to conduct this two-year project.

This project will investigate the impact of a cardiologist at Jefferson House on various outcomes that reflect quality of care. The Investigators leading the project are **Dr. Paul Thompson; Gregory Panza, MS; Beth Taylor, PhD, and Dr. Antonio Fernandez**.

Drs. Lewis and Sheppard Selected as Investigators for REGAIN Trial

Dr. Courtland Lewis and Dr. Rick Sheppard (Anesthesia) were selected as investigators for the REGAIN Trial, a Patient-Centered Outcomes Research Institute-funded multicenter clinical research study to evaluate post-operative patient outcomes and independence levels following surgery with general or regional anesthesia.

Hartford Hospital Continues to Lead the Way in MitraClip Therapy in COAPT Trial

Hartford Hospital continues to lead the way in the state in the percutaneous treatment of high-risk patients with severe functional mitral regurgitation with MitraClip therapy as part of the COAPT Trial. The COAPT Trial is a trial in the U.S. and Canada that is studying an investigational device (the MitraClip) in patients who have functional mitral regurgitation and are not appropriate candidates for mitral valve surgery. Patients are randomly assigned to a Device Group or Control Group. Both groups receive the current standard of care. A total of 26 patients with severe mitral regurgitation have been successfully treated with MitraClip therapy to date, either as research patients or as commercial patients with degenerative disease. MitraClip therapy is performed by a team of physicians, including **Dr. Francis Kiernan, Dr. Aidin Flynn, Dr. Konstadina Darsaklis, Dr. Robert Hagberg and Dr. Raymond McKay**.

Dr. Katie Propst Awarded Research Grant

Dr. Katie Propst was awarded a \$10,000 research grant from the American Association of Gynecologic Laparoscopists to fund work in "Minimally Invasive Gynecology." Only three grant recipients were selected nationwide.

Fellowship Applicants Sought

The Capital Area Health Consortium is seeking applicants for the T. Stewart Hamilton, M.D. Fellowship in Health Management. These fellowships were conceived to create opportunities for individuals engaged in postgraduate study in the field of healthcare.

This fellowship acknowledges Dr. Hamilton's exceptional contributions to Hartford Hospital, the University of Connecticut Health Center and the Capital Area Health Consortium and to all healthcare delivery in the greater Hartford area.

Each year monies are awarded to individuals interested in furthering careers in management, medicine, nursing, public health or any area of service delivery or healthcare research. Previously, awards have been given for independent study and one-time management courses as well as creative research projects. For those seeking funds towards a post-graduate degree, applicants must be in their final year of study.

The award will cover the costs of tuition and possibly some living expenses. It will not cover the cost of travel. Approximately two to five grants (between \$1,000 - \$2,000) are awarded each year. Applicants must be employed full time in one of the seven member hospitals of the Capital Area Health Consortium: including Hartford Hospital and The Hospital of Central Connecticut.

Additional information and application forms are available at our website: www.cach.org or by calling Lory Gasper at 860-676-1110.

Save the Date: DPH Mandated Education for Physicians

Backus Hospital will be sponsoring a State Mandated Lecture Series on Saturday, October 15, beginning at 8 a.m. This all-day program will include one hour lectures on each of the DPH mandated lectures for re-licensure for physicians.

Topics covered will be Risk Management, Sexual Abuse, Domestic Violence, Infectious Disease, Pain Management, Mental Health, and Culture Competence.

All disciplines and provider levels are invited regardless of hospital affiliation. Please look for additional information to follow.

The Hartford Healthcare Cancer Institute Presents: The Basics of Bone Marrow Transplant Lecture Series

6-7 p.m., Hartford Hospital Cancer Center, Taylor Conference Rooms

Sept. 23: Optimal Work-up for HCT Patient

Memorial Sloan Kettering Cancer Center Lecturer to be announced

Oct. 24: Post-transplant Care for Autologous HCT Recipients: Can We Bring Patients Back Home Earlier?

Memorial Sloan Kettering Cancer Center Lecturer to be announced

Nov. 28: Post-transplant Care for Allogeneic HCT Recipients: Can We Bring Patients Back Home Earlier?

Memorial Sloan Kettering Cancer Center Lecturer to be announced

The lecture can also be viewed via videoconference (meet.cancer@video.hhchealth.org) at the following locations:

- Backus Hospital, MOB Conference Room
- MidState Medical Center, Conference Room IV
- The Hospital of Central Connecticut Cancer Center, Conference Room A
- Windham Hospital, Johnson Room

Lectures are CME-eligible. For more information, please contact Andrea Dash at Andrea.Dash@hhchealth.org.

SAVE THE DATE: 32nd Annual Cardiovascular Symposium

October 5

7:30 a.m.-3:30 p.m.

Connecticut Convention Center, Hartford

Information and registration: harthosp.org/CVSymposium

Please register for this event by calling 1.855.442.4373.

SAVE THE DATE: "Foundations of Trust: Connecting Our Community to Research"

October 25-26

Hartford HealthCare is sponsoring a national conference with OHRP entitled "Foundations of Trust: Connecting Our Community to Research."

We look forward to engaging all our colleagues and research partners in this exciting event occurring in Hartford.

Click the link to view the symposium website and register: <https://hartfordhealthcare.org/symposium>

Accepting New Patients? We Can Help

Help New Patients Find You

Hartford HealthCare offers physicians a free powerful tool to help reach potential patients. The system-wide "Find A Doctor" search feature on our website helps potential patients connect with appropriate physicians when they need care.

Patients' searches lead to doctors' online profiles, which are based on information physicians provide to the Medical Staff Office. Details on education, specialty, office locations, languages spoken, biography and any promotional videos are displayed, helping patients make vitally important decisions in choosing a physician.

The HHC Planning and Marketing team is committed to making sure this online information is correct. Please spend a few moments reviewing your profile at HartfordHealthCare.org/verify. Click the "Physician Feedback Form" on the right hand side of your profile to submit changes.

You will need your NPI number to verify your identity. The "Accepting New Patients" filter is set as the default to help patients connect with physicians who are taking new patients. If you are no longer accepting new patients, please let us know. Changes to your profile will be made within three business days.

Operational Update

General Internal Medicine Meeting-Save the Date

November 1 - Pond House Cafe

"Zika virus and new emerging bacteria" - Dr. Jack Ross

Dinner will be provided.

Reminder! Do Your ALICE Armed Intruder Training by Sept. 30

Link to training: <http://hhchelp.hhchealth.org/kinetic/login.jsp>

Compliance & Privacy Update: HealthStream

Beat the September rush and complete your HealthStream training this month! As part of the annual required learning, all employees are "assigned" compliance and privacy training. As applicable to your role, you may be assigned other training such as Business Associate Agreements (Managers and Directors), Sunshine Act/Open Payments System (physicians, APRNs), etc.

All required learning needs to be completed by September 30. We encourage all staff to complete their assignments as soon as possible rather than waiting until the last day.

Educational Events and Programs Calendar Available

[Click here to download.](#)

The Hartford Healthcare Cancer Institute has published an Educational Events and Programs Calendar listing all programs and support groups available this fall.

Patients in Need of Financial Assistance

Do you know a patient who is in need of financial assistance?

Hartford HealthCare can provide help to patients in need. Learn more about the program and how to assist patients on HHC Connect: <https://intranet.hartfordhealthcare.org/inside-hhc/patient-support>

Improving Doctor-to-Doctor Communication: A Free Tool To Help You

We all want to do what is best for our patients. Problems in communication between hospital providers, consultants, and community providers has been identified as a major source of dissatisfaction for both patients and physicians. And it can lead to gaps in patient care.

Hartford Hospital has invested in a tool to help providers improve communication. It is a HIPAA

compliant texting service called TigerText, and we are offering it to the medical staff at no charge.

TigerText allows a provider to send brief text messages, with patient identifiers, to another provider on the system. Examples of texts include quick reports of a procedure, notification of discharge, questions about medications, etc. There is an option to alert people if you are on vacation, and the notices that are sent are marked as read when they are opened by the recipient.

We are anxious for all of our Medical Staff to enroll in this free application. It is VERY easy to use, even for those of us who have problems with new technology. We urge everyone to register and get on this useful and HIPAA compliant system today—it will make your job easier and improve patient safety.

- Here is a TigerText Request form with directions on how to get TigerText: [You can download the form here](#)
- For further help with this, feel free to contact John.Rogalsky@hhchealth.org (860-972-3207).
- Any problems not resolved by the TigerText Help line can be referred to [Dr. Marc Palter](#) at Marc.Palter@hhchealth.org.

TigerText Support

For Hartford Hospital users, TigerText support can be obtained by calling the Hartford HealthCare help desk at 860-545-5699 and choosing option #6; or by calling TigerText Pro support directly at 650-564-4722.

For issues related to password recovery, a helpdesk call is required and will be routed to the Mobility team.

Remind a Colleague: Wash In, Wash Out

All health care workers and patients should feel comfortable reminding any other health care worker to sanitize regardless of their role. This should always be done in a courteous and constructive manner. All health care workers should respond courteously and gratefully when reminded.

If you remind another health care worker to sanitize, and he or she responds with irritation or hostility, please notify their department chief, [Dr. Jack Greene](#) or [Dr. Jack Ross](#), who will communicate with them to prevent recurrences.

Focus on EPIC

[Read the first issue of EpiCycle Essentials for Providers.](#)

No Epic Training / No Access

If you have not completed Epic training, you will not be able to access the EMR and therefore will not be able to provide patient care.

It is best to go through training as soon as possible to allow for time in the practice system. Feedback from other Epic providers has been that it is imperative that you spend time in the practice system to minimize the impact of using the new system on slowing down your workflow. The most frequent

comments made by providers after go-live is they wished they had spent more time in the practice system.

Managing your patient lists, perioperative workflow, hand-offs, and the discharge process are just a few examples of workflows you should be comfortable with before you actually use the system live. You will also want to be sure to sign up for Dragon voice recognition training to improve your efficiency with documentation. Epic training must be completed before you sign up for Dragon training.

You should have received an email from MRM with registration information. If not please contact **Dr. Marc Palter**.

Hartford Hospital Media Coverage

Media Coverage Wrap-Up

Dr. Craig Allen did an interview with WTIC AM radio to talk about the opioid crisis.

Dr. Deborah Feldman appeared live on FOX 61 to talk about a new study that suggests women who are pregnant and take acetaminophen are likely to have children with ADHD.

Dr. Robert Piorkowski appeared on Medical Rounds talking about Melanoma.

Dr. Avital Porat did an interview with WTIC AM radio on the topic of the heat.

Dr. Michele Petrucelli appeared live on FOX CT talking about heat dangers.

Dr. Ken Robinson demonstrated on Ch. 3 how Hartford Hospital treats patients with heat stroke.

Dr. Laura Saunders appeared on Better CT on WFSB, Ch. 3 discussing how social media can ruin a vacation and ways parents can keep their children in the "moment."

Dr. Hank Schwartz was interviewed by Ch. 3 on the topic of suicide among Waterbury police officers and the recent rash of violence against law enforcement.

Dr. Mani Seetharama appeared live in FOX 61 to talk about concussions.

Dr. Patricia (Trish) Sheiner spoke to FOX 61 about the importance of organ donation after New Haven State Senate President Martin Looney announced he needs a kidney transplant.

Dr. Belachew Tessema was interviewed on Chaz & AJ talking about allergies.

Dr. Elena Tunitsky was on CT Style talking about a new procedure using a "bladder pacemaker" to treat urinary incontinence.

Dr. Paul Weigle was interviewed live on FOX 61 about the Pokemon Go craze. https://youtu.be/2PhoZow4_xs

Dr. Laura Saunders will be participating in the next Courant Conversation focused on Parenting in the Digital Age. The event will be held [on Tuesday, Oct. 18, from 5:30-7:30 p.m.](#), at the Connecticut Science Center in Hartford. The panel discussion will encompass both the perils of technology for kids, as well as the opportunities, and how parents can help their children navigate both the possibilities and the pitfalls.

Dr. Paul Thompson received "top quote of the week" in Medpage Today about routine screening: "I'm a Pink Floyd fan: 'Teacher, leave those kids alone.'"

Connect to Healthier on NBC-CT

HHC's two-minute "Connect to Healthier" segment airs each Sunday at 9:20 a.m. and it's posted fresh each Monday on HHC Connect, our Intranet.

- **Total Shoulder Outpatient Surgery** - Roy Davidson had the region's first total shoulder outpatient surgery. He did not stay overnight, but had surgery and was able to go home the same day. His story highlights newer options in surgical pain treatment; many patients have to stay in the hospital for pain control, but newer, longer-lasting nerve blocks mean fewer prescriptions for potentially addictive narcotics. Those who are candidates for this kind of surgery are able to go home sooner. This two-minute segment airs each Sunday on NBC-CT at 9:20 a.m. [Watch it here.](https://youtu.be/VoiE7VWeUXU)
 - **Nerve blocks for headache** - Kate Wizeman is pregnant with her first child, but migraine pain made pregnancy unbearable. She went to six different doctors seeking help when she finally met HHC headache specialist **Dr. Brian Grosberg**, who gave her a new option: nerve blocks. [Watch it here.](#)
 - **TAVR** - Dr. George Paul was too frail for open heart surgery but had severe aortic stenosis that was causing his heart to fail. He was one of Hartford Hospital's first patients to undergo TAVR, a minimally invasive choice for valve replacement. Four years later, Dr. Paul is an active 97 year old who appreciates his second chance at life. [Watch it here.](#)
 - **A Grateful Patient** - John Myers didn't know that his heart was failing. In just nine days, he survived two heart attacks and would undergo quadruple bypass surgery at Hartford Hospital. Watch him read a special poem to the team at cardiac rehab that helped him through such a difficult time. [Watch it here.](#)
 - **NAVY MEDICAL OFFICERS TRAIN AT HARTFORD HOSPITAL** - Medical Officers with the U.S. Navy could train anywhere in the world... and they choose Connecticut. Four times a year, medical officers with the US Navy head to Hartford Hospital and the Center for Education, Simulation and Innovation... or CESI. [Watch it here.](#)
 - **Don't let Parkinson's hold you back.** How dancing can help!
<https://hartfordhealthcare.org/services/movement-disorders-center/service-locations>
 - **Hartford HealthCare at Home** Opens Doors in Bloomfield
<https://hartfordhealthcare.org/about-hartford-healthcare/news-press/hhc-at-home-opens-in-bloomfield>
- Can texting save lives?** You can help. Become a volunteer!
<http://www.crisistextline.org/join-our-efforts/volunteer/>
- **HHC plain language initiative** and helps it make sense to an external audience:
<https://www.dropbox.com/s/h7rdmaf027b1bph/060816%20CTH%20Plain%20Language%202.mov?dl=0>

Upcoming News Service Content; Share Your Stories

The Hartford HealthCare News Service is actively creating content with media partners across the state. Please let us know if you have great patient stories to share. Share your stories with us so we can share them to a wider audience.

[Connect to Healthier](#)

Sundays in the 9 a.m. hour, we broadcast a two minute health segment on NBC CT.

[Medical Rounds](#)

Partnership with WFSB. Weekly live interview from the HHC studio at 5:45 p.m.

[HealthCare Matters radio program](#)

Every month, Elliot Joseph highlights an important health care related topic with nationally recognized experts on CBS affiliate WTIC-am, NewTalk 1080, Connecticut's largest and most popular talk radio station

[Healthier Connections](#)

Monthly partnership with FOX CT.

[CT STYLE](#)

Monthly partnership with WTNH.

HHC YouTube page: <https://www.youtube.com/user/HartfordHospitalCT>

[Link to contact information across the system: Hartford HealthCare Media Relations Team](#)

ICP News

ICP News: Coming in September

ICP News is now a Quarterly publication. The next issue will be published in September.

For a look at our previous issues, visit www.integratedcarepartners.org.

CME Applications

Interested In Hosting a CME Event?

In order to ensure that your educational event meets the standards established by the ACCME and the CSMS, the HH CME department has established the following deadlines for submission of CME applications.

To ensure a timely review of your application, we strongly recommend advance planning for all events.

- Complete applications for a recurring series such as Grand Rounds must be submitted **at least 4 weeks prior** to the planned activity.
- For a conference, course, or symposia, a complete application must be submitted **at least 12 weeks prior** to the event. We strongly encourage activity planners to contact the HH CME department at least 6 to 12 months prior to the date of the course in order to begin the planning process.

We have developed educational resources to assist planners with the application process. Please contact the HH CME office at ContinuingEd@HHHealth.org or (860) 972-5816 to schedule an appointment with our team to discuss your CME needs.

State Mandated CME Renewal Available Free To HH Doctors through HealthStream LMS

State mandated CME for physician license renewal is available free on the Hartford Hospital HealthStream Learning Management System.

You will need your Employee ID to access HealthStream. If you need the CME Programs, but do not have a HealthStream ID, a Temporary ID can be provided for you.

Please email HealthStream@HHHealth.org and request an ID and password for CME Courses. You will receive an email with the ID, password and instructions for accessing the courses.

To access HealthStream, use the link from the intranet, or click [here](#). Once you login, click on the Catalog tab and search for CME to view the available courses.

Once you have passed the post-test and evaluation, you will be awarded a printable CME certificate. Your CME will also be maintained and easily self-service accessed on the HealthStream site, should you need a copy in the future.

Please note that your Risk Management required activities through MRM will provide your Risk Management CME.

HH In the News

Hartford Business Journal: Hartford Hospital's Institute of Living studying hoarding treatments

Doctors at the Institute of Living (IOL) at Hartford Hospital are leading a clinical study to try to determine what kind of therapy works best for the hoarding disorder and how counseling can re-direct pathways in the brain, allowing patients to make healthier decisions.

The IOL is conducting community events Thursday and Monday on the disorder, treatment options and the study, for which it seeks participants.

Hoarding is a type of mental illness, classified as an obsessive compulsive disorder. Frequently, people who hoard also suffer from other mental or physical conditions including depression, anxiety or chronic illnesses, according to news release from Hartford HealthCare.

Hoarding disorder affects 3 to 5 percent of the population, according to **Dr. David Tolin**, director of Anxiety Disorders Center at the IOL.

In the study Tolin and colleagues are doing, participants engage in a 16-week course of cognitive behavioral therapy that encourages them to set goals, make decisions more effectively and teaches them ways to manage some the emotional upset associated with clearing up the clutter, according to a news release. Brain scans taken throughout the treatment will help researchers attempt to identify

areas of the brain that might be affected by the disorder and, potentially the treatment.

Tolin hopes the study will help create more targeted and effective approaches to treating those with hoarding disorder.

The community events on hoarding will be Thursday, 6 p.m. to 7:45 p.m., Hartford Hospital Wellness Center, Blue Back Square, 65 Memorial Dr., West Hartford; and Monday, 6 p.m. to 7:45 p.m., Hartford Hospital Family Health Center, 1290 Silas Deane Highway, Wethersfield.

Connecticut Hospitals Recognized For Promoting Organ, Eye and Tissue Donation

CHA Update

Twenty CHA member hospitals were recognized this week by the U.S. Department of Health and Human Services' Health Resources and Services Administration (HRSA) for promoting enrollment in state organ donor registries.

Hartford Hospital, Saint Francis Hospital and Medical Center, and Yale New Haven Hospital received platinum recognition. Johnson Memorial Hospital received gold recognition.

MidState Medical Center, the **Hospital of Central Connecticut**, The **William W. Backus Hospital**, and **Windham Hospital** received silver recognition, as did Bridgeport Hospital, Bristol Hospital, The Charlotte Hungerford Hospital, Day Kimball Hospital, Griffin Hospital, Manchester Memorial Hospital, Middlesex Hospital, Rockville General Hospital, and Waterbury Hospital.

The hospitals conducted awareness and registry campaigns to educate staff, patients, visitors, and community members about the critical need for organ, eye, and tissue donors. They earned points for each activity implemented between May 2015 and April 2016 and were awarded recognition through the HRSA Workplace Partnership for Life Hospital Campaign. Nationwide, the campaign has added 400,000 donor enrollments to state registries nationwide since 2011.

HRSA's Workplace Partnership for Life campaign encourages hospitals to increase the number of people in the country who are registered organ, eye, and tissue donors, with the goal of increasing the number of organs available for transplant. The campaign unites donation advocates at hospitals with representatives from their local organ procurement organizations, Donate Life America affiliates, and state and regional hospital associations.

In the HHC System

Medicare Releases New Ratings System for Hospitals

Hartford Courant

Backus Hospital, part of the **Hartford HealthCare** system, has received the highest score among Connecticut hospitals reviewed by the federal Centers for Medicare & Medicaid Services.

Under its controversial "Overall Hospital Quality Star Rating" system, the government ranked 3,662 hospitals around the country on a scale from one to five stars, with just 3 percent receiving five stars.

No Connecticut hospital received five stars. Only Backus, located in Norwich, received four stars. Nationwide, 26 percent of hospitals received four stars.

The data compares how each hospital compares to a national average of hospitals on mortality, safety, readmission rates, effectiveness and timeliness of care, efficient use of medical imaging and patient experience. However, not every hospital tracked every measure that went into those categories, and hospitals complain that those with fewer metrics to weigh are most likely to get five stars.

Hospitals lobbied hard against the star rating system, and a majority of Congress signed a letter asking Medicare not to release the ratings until the methodology had been changed. The ratings came out Wednesday.

The association that represents teaching hospitals issued a statement that said in part: "They are based on a deeply flawed methodology that does not take into account important differences in the patient populations and the complexity of conditions that teaching hospitals treat. As a result, many of the nation's leading teaching hospitals - institutions that provide the most advanced health care in the world - have been assigned lower ratings than other hospitals that treat patients with less complex conditions...."

Dr. Rocco Orlando, senior vice president and chief medical officer for Hartford HealthCare, called the ratings "very much a work in progress," but said that at least some components do reflect real quality measures, such as hospital-acquired infections and avoidable surgical complications.

He said that the five hospitals in their system range from four stars to two stars, but all have been working concertedly for five years on improving safety, since Medicare started asking for data on these incidents.

He said that being tracked is a useful motivator to do better. And, he said, Hartford Hospital likely will move up from two stars to three next year, because it has been improving dramatically on safety. He said safety was the biggest drag on their results.

Nine hospitals in Connecticut received two stars, including **Hartford Hospital, and the Hospital of Central Connecticut**. Nationwide, 20 percent of hospitals received three stars.

Orlando said he expects Medicare will make adjustments to account for which hospitals see more poor patients, and that will help Hartford Hospital's relative ranking. For instance, above average readmission rates are more common among poor patients.

State payment not enough for cash-strapped WCMH

While a recent \$1.4 million supplemental payment from the state will help **Windham Community Memorial Hospital**, it won't be enough to overcome the hospital's significant deficit this fiscal year.

Any amount helps for the hospital, but as of a month or two ago, we had already lost \$9.4 million for the year. So this doesn't come close to making up for that Hartford HealthCare Director of Service Line Communications Shawn Mawhiney said. On June 20, the state released \$150 million in supplemental payments to hospitals.

In addition to the payment of approximately \$1.4 million for the current fiscal year, Mawhiney said Windham Hospital received a payment of approximately \$990,000 for next fiscal year.

Windham Hospital's fiscal year closes in September. The hospital has already lost nearly double the amount of money it lost last year, which was \$5.6 million.

Local legislators have recently criticized Hartford HealthCare, noting the highest paid employees in the system are making millions of dollars while Windham Hospital is in financial trouble.

Backus seeking to purchase Waterford surgery center

The **William W. Backus Hospital** is seeking to expand its presence on the shoreline with the acquisition of a free-standing surgery center. Backus is proposing to pay \$16.7 million for the center.

The Norwich-based hospital, part of the Hartford Health Care network, announced this week that it is seeking to purchase a majority share of Constitution Surgery Center East, which provides eye and orthopedic surgery at its 174 Cross Road offices in Waterford.

If approved by state regulators, the surgery center would be the second Backus facility in that town, after the Backus Family Health Center on Parkway South.

The surgery center opened in 2001 as an ophthalmic surgery center, expanding in 2011 with the addition of orthopedic surgery services, according to the center's website. It is owned by 17 physicians, who would retain 49 percent ownership of the facility, while Backus would acquire a 51 percent share, according to a notice published on Thursday.

Shawn Mawhiney, spokesman for Backus, said Friday that the center would be run as an equal partnership, but that current staff of the center would remain as managers. Mawhiney said the purchase will allow Backus to better coordinate care and improve patient access.

"With most of the surgeons already on our medical staff, and many of the patients from our service area, this proposal would allow us to share best practices, establish one medical record and provide more coordinated care overall before, during and after surgery," he said.

Health Care News In the Region

CT gets failing grade for healthcare price transparency

Hartford Business Journal: July 27

Most states, including Connecticut, could do more to give consumers the price information they need for making educated healthcare choices, according to an annual report card released this week by two independent health policy organizations.

The 2016 Report Card on State Price Transparency Laws developed by the Newtown-based Health Care Incentives Improvement Institute (HCI3) and California-based Catalyst for Payment Reform (CPR), gave 43 states an "F" for failing to meet even minimum standards, according to a news release from the organizations.

Only three states (New Hampshire, Colorado, and Maine) received an "A" for providing detailed pricing on a variety of procedures through easy-to-use public websites, backed by rich data sources.

While Connecticut was among states getting an "F," the report card suggested the state should take the data from its established all-payer claims database (APCD) and post it on a publicly accessible website.

"Real health care price transparency for consumers is dependent on rich data sources that provide meaningful price information on a wide range of procedures and services," Francois de Brantes, HCI3 executive director and lead author of the report, said in the release. "But that's not enough. It must be presented on an accessible, publicly available website."

[Read more here.](#)

Hot Topics in Health Care

Patients who discuss treatment online are more satisfied

fiercehealthcare, July 29

Researchers analyzed a sample of 2,460 women recently diagnosed with breast cancer. They found 41 percent of the women responded to their diagnosis by discussing it through e-mail, text messages, Facebook, Twitter and online support groups, to determine the best treatment options and their therapeutic value.

[Read more here.](#)

Coming Events

The Hartford Medical Society Presents "The Upcoming Presidential Elections"

September 14 (Wednesday)

Presented by Attorney Kevin F. Rennie

Town and County, 22 Woodland Street, Hartford

5:30 p.m. Registration & Cocktails (cash bar)

6:15 p.m. Dinner, followed by program

Registration is \$20/member, \$35/guest or non-member, and includes cash bar, dinner, and presentation. If you have questions please call the HMS office at (860) 586-7573.

Medical Staff End of Summer Event

September 16 (Friday)

6-9 p.m., New Britain Museum of American Art

Join the Medical Staff Officers and your colleagues from the Hartford Hospital Medical Staff for a unique opportunity to socialize and enjoy each other's company. More details to follow!

Hartford Hospital Auxiliary Benefit Golf Tournament

September 19 (Monday)

The 27th annual Hartford Hospital Auxiliary Benefit Golf Tournament will be held on **Monday, September 19**, at Tumble Brook Country Club in Bloomfield.

This year's beneficiary is the Department of Nursing Education and Research. For more information about the golf tournament or to make a donation the silent auction and raffle, please contact Lori Flaks at lbflaks@yahoo.com or Amy Steinberg at asteinberg74@gmail.com.

SAVE THE DATE: October 25-26: "Foundations of Trust: Connecting Our Community to Research."

Hartford HealthCare is sponsoring a national conference with OHRP entitled "Foundations of Trust: Connecting Our Community to Research."

We look forward to engaging all our colleagues and research partners in this exciting event occurring in Hartford.

Click the link to view the symposium website and register: <https://hartfordhealthcare.org/symposium>

The Hartford Medical Society Presents "Civil War Hospital Newspapers"

October 26 (Wednesday)

Presented by Dr. Ira Spar

Town and County, 22 Woodland Street, Hartford

5:30 p.m. Registration & Cocktails (cash bar)

6:15 p.m. Dinner, followed by program

Registration is \$20/member, \$35/guest or non-member, and includes cash bar, dinner, and presentation. If you have questions please call the HMS office at (860) 586-7573.

General Internal Medicine Meeting

Save the Date- November 1

Pond House Cafe

"Zika virus and new emerging bacteria"

Dr Jack Ross- Dinner Provided

Department of Medicine 2nd Annual Blood Management Symposium

Friday, Nov. 4, 7 a.m.- 4 p.m.

Heublein Hall

No charge. Light breakfast and lunch will be served.

5 hours CME for medical professionals

To register, call 1.855.HHC.HERE

The Seymour Street Journal (SSJ) has been developed to communicate key messages pertinent to our hospital's physicians. It will keep you informed and up-to-date on hospital, network, and health care news in a concise, convenient format. The SSJ will be sent to your preferred e-mail address every other Sunday. If you would like to be added to the *Seymour Street Journal* email list, or to receive it at a different email address, please opt-in at harthosp.org/SSJ. This ensures that you will receive the newsletter at your preferred email address. For any questions or suggestions, please contact [Dr. Stacy Nerenstone](#), Medical Staff president, at 860-545-3043, or editor Annie Emanuelli at 860-972-2199.

[Update your profile](#) | [Manage your subscriptions](#) | [View as a web page](#)

This email was sent by: **Hartford HealthCare**
1 State Street Hartford, CT, 06103

